RECEIVED

| | | | • | • | | | 101 |
|--|---|--------------------------------------|---|---|------------------|-------------|-----------------------------|
| FORM P0-875 U.S. DEPARTMENT OF COMMERCE PATENT OFFICE | | | SERIAL NUMBER FILE | | FILINGS | 全 | |
| PATENT | | TION FEE DETERM RECORD | HOITAHI | APPLICANT (First Named Only) / ICENSING & REVIEW WHAT H. Kite Han Heyninger | | | |
| CLAIMS AS FILED - PART I | | | | | | | |
| | (1) FOR | | (2) Number Filed | | 1 | (4) RATE | (5) BASIC FEE \$65.00 |
| | TOTAL CLAIMS | 3 | 3 -10= | | = | × \$2.00 | |
| | INDEPEND CLAIMS | DENT | - 1= | + | = · _ | × \$10.00 | 10.00 |
| | | | | • | TOTAL FEE | FILING | 75,00 |
| CLAIMS AS AMENDED - PART II | | | | | | | |
| | Ξ | (2) CLAIMS REMAINING AFTER AMENDMENT | P | (4) IGHEST NO. REVIOUSLY PAID FOR | PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| AMENOMENT | TOTAL | * 3 | MINUS * | * /8 | | × \$2 | = |
| A | INDEP. | * 2 | MINUS | 2 | | × \$10 | = |
| | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | |
| AMENDMENT | TOTAL | * | * MINUS | * | = | × \$2 | = |
| | INDEP. | * | MINUS | | = | × \$10 | = |
| | | | | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | |
| ' | TOTAL | * | MINUS * | * | = | × 52 | = |
| AMENDMENT | INDE P. | * | MINUS | | = | × \$10 | = |
| | | | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | |
| | , TOTAL | * | MINUS * | * | = | × \$2 | = . |
| AMENDMENT | INDEP. | * | MINUS | | = | × \$10 | = |
| | | | | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | |
| * If the entry in Column 2 is less than the entry in Column 4, write "O" in Column 5. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 10, write "10" in this space. | | | | | | | |

The "Highest Number Previously Paid For" ("Total" or "Indep.") is the highest number found in the appropriate box in Column 2.